

Dec-06-06

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From-Sonnenschein Nath & Rosenthal (4)

314 259 5959

T-791 P.002/007 F-100

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Attorney Docket No. 60005161-0061

DEC 06 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Leuthardt et al. )  
Patent No. 7,120,486 )  
Issue Date: October 10, 2006 )  
For: BRAIN COMPUTER INTERFACE )  
  
**Via Facsimile 571-273-8300**  
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Alexandria, VA 22313-1450

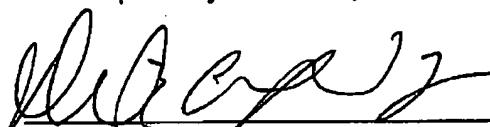
**REQUEST FOR CERTIFICATE OF CORRECTION PURSUANT TO 37 CFR 3.81(b)**

Applicants respectfully request a Certificate of Correction be issued to list Washington University, St. Louis, Missouri (US) and Health Research Inc., of Rensselaer, New York (US) as Assignees. Attached is a copy of the Corrected Notice of Recordation of Assignment document mailed on May 25, 2006 listing this Recordation date as May 23, 2006 at Reel/Frame 017671/0486.

Applicants submit herewith a credit card payment form for \$100.00 to cover the fee set forth in 37 CFR 1.20(a). The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Account No. 19-3140.

Respectfully submitted,

Dated: 06 DEC 06

By: 

David E. Crawford, Jr.,  
Registration No. 38,118  
Customer No. 26263  
314.259.5810

12/07/2006 FMETEK1 00000005 7120486

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FROM: David E. Crawford, Jr.

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OPERATOR'S NAME: Sandra K Gress

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TYPE OF PAPER TRANSMITTED: REQUEST FOR CERTIFICATE OF CORRECTION PURSUANT TO 37 CFR 3.81(b)APPLICANT'S NAME: Leuthardt et al.PATENT NO. 7,120,486

ISSUED 10/10/2006

APPLICATION TITLE: Container

Original will/will not be mailed

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TARA A. NEALEY, PH.D.  
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RECORDATION DATE: 05/23/2006

REEL/FRAME: 017671/0486  
NUMBER OF PAGES: 8

BRIEF: REQUEST FOR CORRECTON OF EXECUTION DATES FOR ASSIGNS GERWIN  
SCHALK AND JONATHAN RICKEL WOLPAW AND ADDITION OF ASSIGNEE  
HEALTH RESEARCH INC. FOR ASSIGNMENT RECORDED AT REEL/FRAME  
014790/0270.

DOCKET NUMBER: 60005161-0061

ASSIGNOR:  
LEUTHARDT, ERIC C. DOC DATE: 10/05/2004

ASSIGNOR:  
SCHALK, GERWIN DOC DATE: 05/24/2004

ASSIGNOR:  
MORAN, DANIEL W. DOC DATE: 06/14/2004

ASSIGNOR:  
WOLPAW, JONATHAN RICKEL DOC DATE: 05/24/2004

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017671/0486 PAGE 2

ASSIGNOR:  
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DOC DATE: 05/14/2004

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ASSIGNEE:  
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RENSSELAER, NEW YORK 12144

SERIAL NUMBER: 10735474  
PATENT NUMBER:  
TITLE: BRAIN COMPUTER INTERFACE

FILING DATE: 12/12/2003  
ISSUE DATE:

TARA WASHINGTON, EXAMINER  
ASSIGNMENT SERVICES BRANCH  
PUBLIC RECORDS DIVISION

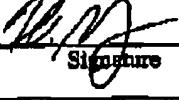
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3. Nature of conveyance/Execution Date(s): Execution Date(s) _____ <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Joint Research Agreement <input type="checkbox"/> Government Interest Assignment <input type="checkbox"/> Executive Order 9424, Confidentiality License <input checked="" type="checkbox"/> Other: Request for correction of execution dates for Assignors Gerwin Schalk and Jonathan Rickel Wolpaw and addition of Assignee Health Research Inc. for assignment recorded at Reel/Frame: 014790/0270	Health Research Inc. 1 University Place, Suite 21 Rensselaer, New York 12144  Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Application patent number(s): <input type="checkbox"/> This document is being filed together with a new application.	
A. Patent Application No.(s) 10/735,474	B. Patent No.(s)
Additional numbers attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Name and address to whom correspondence concerning document should be mailed:  Tara A. Nealey, Ph.D. Sonnenschein Nath & Rosenthal LLP Post Office Box 061080 Wacker Drive Station Sears Tower Chicago, Illinois 60606-1080 (312) 259-5867 main (312) 259-5999 facsimile tnealey@sonnenschein.com	6. Total number of applications and patents involved: 1  7. Total fee (37 CFR 1.21(b) & 3.41) \$40.00 <input checked="" type="checkbox"/> Credit card payment form (AMEX) attached <input checked="" type="checkbox"/> Additional fees can be charged to deposit account 19-3140 <input type="checkbox"/> None required (government interest not affecting fee) 8. Payment Information a. Credit Card Last 4 Numbers 4946 Expiration Date 07-06
9. Signature:  Tara A. Nealey, Ph.D.  Name of Person Signing <span style="float: right;">5/23/2006</span> <span style="float: right;">Date</span>	
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